

PHARMACY INVOICE

Victoria Hospital Bangalore

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DL No. :KA-B62-200644 GST No : 24AVOPHY1843N1K PAN No: UMMAA2099X

Bill No.:26807

Bill Date: 04-03-2023

PATIENT DETAILS

DOCTOR DETAILS

Patient name: Kashish Patel

Doctor name: Komal Patel

Patient contact no: 9244605809

Doctor contact no: 9506283093

Sl.no	Product/Service Name	HSN/SAC	GST	Amount
1	Allergy Testing Fee	999345	18%	799.00

TOTAL

799.00



Authorised Signature

GRAND TOTAL

942.82